PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must		
50054	7590 07/31		F	ave its own certificat	e of mailing or transmission.	
		72009	Certificate of Mailing or Transmission			
PENERIE SEVE CIEDONALIZA				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
1804xEASTASTASTASETXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX						
CHRUSTENSEN O'CONVOR JOHNSON KINDNESS PILC 1420 FIFTH AVENUE				(Depositor's name)		
SUITE 2800)						(Signature)
SEATTLE, WA 98101-2347						(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVEN		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/541,447 04/07/2006			Pek-Yew Tan		7 NATE-38449	8201
TITLE OF INVENTION: SERVICE IN WLAN INTER-WORKING, ADDRESS MANAGEMENT SYSTEM, AND METHOD						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TOTAL FEE(S) DUI	E DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	11/02/2009
EXAMI	NER	ART UNIT	CLASS-SUBCLASS			
TRINH, S	SONNY	2618	455-410000			
1. Change of corresponder CFR 1.363).	• ,		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys			
Change of correspo	ondence address (or Cha /122) attached.	nge of Correspondence	or agents OR, alternatively, Johnson Kindness PIIC			
		(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.			
3. ASSIGNEE NAME AN	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Panasonic Corporation Kac				, Osaka, J	apan	·
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government						
4a. The following fee(s) a	re submitted:	41	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)			
Issue Fee Pee (No small entity discount permitted)			A check is enclosed. Payment by credit card. Brown TRONZEGE IS MONCHEST.			
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-1/41/enclose sites and copy with some			
= 710 valies of def "	or copies		overpayment, to De	posit Account Numb	er <u>03-1740</u> (etatologe)	incenda odpy nichás komá
5. Change in Entity State a. Applicant claims	us (from status indicated SMALL ENTITY statu		b. Applicant is no	onger claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).
	Publication Fee (if requ	uired) will not be accepted	d from anyone other tha		istered attorney or agent; or t	
(/2-			Date 9.14.09			
Authorized Signature	1			Date		
Typed or printed name Ooshua A. Kading			Registration No. <u>59261</u>			
This collection of informa an application. Confidenti submitting the completed this form and/or suggestic Box 1450, Alexandria, Vi Alexandria, Virginia 2231	tion is required by 37 C in the same of th	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR (on is required to obtain 1.14. This collection is depending upon the in e Chief Information Of COMPLETED FORMS	or retain a benefit by estimated to take 12 dividual case. Any co icer, U.S. Patent and TO THIS ADDRES	the public which is to file (an minutes to complete, includi omments on the amount of ti Trademark Office, U.S. Dep S. SEND TO: Commissioner	d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						